Entered -09/12/00 - sb CL 00L0556 - GWENDOLYN BURNS

CLAIM OF: Jimmy L. Curry 4020 Danforth Road, SW, #103 Atlanta, Georgia 30331

00- _R-1591

For vehicular damages alleged to have been sustained from a metal plate that was not properly secured to the roadway on September 1, 2000 at Pryor Street, SW and Mitchell Street, SW.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **Jimmy L. Curry** the sum of \$1,476.06 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular damage incident on September 1, 2000 at Pryor Street, SW and Mitchell Street, SW as is more particularly set forth in the within claim; said sum taken from and charged to account 2J01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD CITY ATTORNEY

ROSALIND RUBENS NEWELL DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0556	Date: <u>September 28, 2000</u>		
CI I CI			
Claimant / Victim JIMMY L. CURRY			
BY: (Atty) (Ins. Co.)	- 20221		
Address: 4020 Danforth Road, SW, #103, Atlanta, Georgi	0 De dile Inime ©		
Subrogation: Claim for Property damage \$ 1,476. Date of Notice: 9/12/00 Method: Written, F. Conforms to Notice: O.C.G.A. §36-33-5 X Date of Occurrence 9/1/00 Place: Pr	Bodily Injury \$		
Date of Notice: 9/12/00 Method: Written, F	roper X Improper		
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.) X		
Date of Occurrence 9/1/00 Place: Prince: Princ	yor Street, SW & Mitchell Street, SW		
Department PUBLIC WORKS Division Sewer Or	perations		
Employee involved Disciplin	ary Action:		
NATURE OF CLARA Chimark's webish sectional dama			
NATURE OF CLAIM: Claimant's vehicle sustained dama			
the roadway that was not properly secured to the roadway.			
ININTECTIC ATION.			
INVESTIGATION:			
Statemental City amplayee V Claimant Of	thore Written Oral V		
Statements: City employee X Claimant Ot	Dont Poport Other		
Pictures Diagrams Reports: Police Clareffic citations issued: City Driver Clarefice	Dept Report Other		
Citation linearities Cita Driver	imant Driver		
Citation disposition: City Driver Cla	imant Driver		
BASIS OF RECOMMENDATION:			
DASIS OF RECOMMENDATION.			
Function: Governmental Min	isterial X		
Function: Governmental Min Improper Notice More than Six Months	Other Damages reasonable X		
City not involved Offer rejected	Compromise settlement		
Repair/replacement by Ins. CoRe	nair/replacement by City Forces		
Claimant Negligent City Negligent X	Joint Claim Abandoned		
Claimant regingent City regingent	JointOldini / Iodindoned		
]	Respectfully submitted,		
	11 0 2		
	The della Today		
	. Aluerablin 1/1/11		
Ī	NVESTIGATOR - GWENDOLYN BURNS		
_	, ,		
RECOMMENDATION!			
Pay \$ 1,763.57 Adverse Accou	nt charged: 1A01 2J01X 2H01		
Claims Manager: ///////////	Concur/date O9. 28 W		
	uncil Action		
FORM 23-61			

RECEIVED SEP 12 2000 BURKS

RE: CLAIM FOR DAMAGES 09/12/00

COUNCIL OF THE CITY OF ATLANTA MUNICIPAL CLERK

City Hall 55 Trinity Avenue, S.W. Atlanta, Georgia 30335

Today's Date: 9 - 12 - 00

Dear Municipal Clerk:			OOLO556 - GWEN BURNS		
This is to notify the City of Atlanta that and/or \$bodil	I have suffered damage y injury for which I con	es in the amount sum of \$ ntend the City is liable.	1,476.06	property	
1. Date of incident: $\frac{9 - 1 \cdot 2}{\text{(month/day/)}}$	year) 2. Tin	ne of Incident: 9 A N	3. Police called: Yes	No	
4. Location of incident (including stree	et address): Pri	10x + 42	ittchell		
5. Name of your insurance company:		J 	Policy No		
 4. Location of incident (including stree 5. Name of your insurance company: 6. State what and how incident occurre 	d: <u>See pol</u>	ice report			
7. ALL ESTIMATES AND DAMAG RESULT IN YOUR CLAIM BEI				LAIMS WILL	
8. The registered owner must make the proof of ownership of your vehicle (copy of the current tag	receipt or title).	wing and attach two (2) estimat	es of repair and	
Your vehicle:(Make)	(Year)	(Tag Number)	(Driver's Name)		
		,	,		
City vehicle: (Make)	(City Driver	's Name)	(Department/Bureau)		
9. Witness:(Name)					
(Name)	(Address)		(Telephone Number)		
 The acknowledgment of this clair State law, nor is it an admission of line 				as granted by	
11. This claim should be mailed imme	diately to the address	shown above.	_		
I HEREBY SWEAR OR AFFIRM T INFORMATION IS TRUE AND CO		J'M	(Print Claimant's Name)	r/	
		4020 DANI	Forth Rd. Sw.	103	
Signature of Claimant		Atlant	(Address) A GA - 30 - City, State and Zip Code)	<i>33</i> /	
		(1)	City, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
		PAGEN4/1 945	5_944(4) 699-3	2429	

(Work Number)

(Home Number)

GENERAL RELEASE AND INDEMNIFICATION

CLAIM NUMBER 00L0556	\$	1,476.06	
	d by the CITY OF ATLANT my heirs, executors, administ oyees, demands, actions, ca or on account of anything that incident which occurred	uses of action, suits, damages, loss a t has heretofore occurred, and particular	by er nd rly
admission on the part of the City, its office undersigned further covenants and agrees to servants and employees, from any and all classervants and employees, may be called upon	ers, agents, servants or emplo o indemnify and hold harmle aims, damages or costs which to on to make as a result of the e	ss the City of Atlanta, its officers, agen the said City of Atlanta, its officers, agen	the its, its,
of the sum stated above; that no other promsaid City or its agents to cause me to sign instrument.	ise or agreement of any kind	or nature has been made to or with me understand the meaning and intent of the	by
WITNESS my hand and seal this	Jimmy L. Curry	day of fyllapi, 20 00 (L.	
The above release was read and expour presence on the date above written.	plained to, and signed by the s	Jimmy L. Curry (Jimmy L. Curry)	in
		WITNESSES	_